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| Application Number | 10/624,020 |
| Filing Date | 07-21-2003 |
| First Named Inventor | M. Seul |
| Art Unit | 1641 |
| Examiner Name | P. Do |
| Attorney Docket Number | PARSE-C4 |

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

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Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|---|-----------|----------------------|
| Signature |  | | |
| Name | Chiu Chau | | |
| Date | 12/20/2006 | Telephone | 908 226 8200 ext 208 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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